



**Cornwall and
Isles of Scilly**

NHS funded transport policy

Date approved: 14 February 2023

NHS Cornwall and Isles of Scilly Integrated Care Board

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Document control

Title of document: NHS funded transport policy

Lead directorate: Planned care

Lead team: Clinical support

Document type: Policy

Subject category: Transport

Author(s) name: Sam Wilson and Tracy Gaughran

Date ratified: 14 February 2023

Ratified by: Director for commissioning and inclusion

Review frequency: 2 years

To be reviewed by date: 14 February 2025

Target audience: Transport staff and system

Can this policy be released under FOI? Yes

Give reasons for exemption if no: N/A

Version control

Version number	Revision date	Revision by	Nature of revisions
V2	October 2022	Commissioning manger	Transfer to ICB template and reviewed with national guidelines
V2	14 February 2023	Director for commissioning and inclusion	Ratification by relevant director

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1. Introduction

This document provides a framework for local decision making when assessing the eligibility of patients for Non-emergency NHS funded patient transport in line with national guidance and current legislation. It provides a basis for ensuring equitable access to non-emergency NHS funded patient transport to eligible patients in Cornwall and the Isles of Scilly.

Patients travelling to receive NHS non-emergency healthcare are normally expected to make their own way using their own transport or the range of public, community or voluntary transport available locally. However, patients may be eligible for assistance on the grounds of either health need or financial need:

- **NHS Funded Patient Transport for health need:** NHS funded patient transport services are available to patients who are unable to travel on private or public transport due to a health need. This service mainly helps patients who are accessing healthcare services, being transferred between healthcare services or being returned back to their place of residence having received healthcare services. The healthcare must be NHS funded in order to be eligible for non-emergency patient transport. NHS funded patient transport services are available free of charge to eligible patients.
- **NHS Funded Patient Transport for financial need:** Patients that do not have a health need but are on a low income, or in receipt of certain benefits, may be able to claim a refund of reasonable travel costs under the Healthcare Travel Costs Scheme if they are referred to hospital or other NHS premises for NHS specialist treatment or diagnostic tests. Patients are expected to use the cheapest suitable mode of transport for their circumstances.

Both patients and escorts and/or carers will be assessed against eligibility criteria defined nationally by the Department of Health and supported by NHS England Guidance:

- [Eligibility criteria for patient transport services](#)
- [Healthcare travel costs scheme](#)

The purpose of these eligibility criteria is to provide a fair and equitable service to patients accessing NHS funded patient transport. It is also to ensure that this resource is provided to those who have a specific medical or financial need that means that they require transportation to access healthcare services or return home.

2. Purpose

To standardise access to non-emergency NHS funded patient transport across Cornwall and Isles of Scilly for patients with a medical or financial need for transport to and from a premises providing non-emergency NHS healthcare, and between NHS healthcare providers (commissioned by the NHS to deliver NHS funded care/treatment). To achieve this, the eligibility criteria outlined in this document has been standardised and will apply to all patients registered with an NHS Cornwall and Isles of Scilly (CIOS) GP practice.

It will ensure delivery of a sustainable patient transport service, which is fit for future as it has been developed in association with patients, clinicians and partners. The geographical challenges, that Cornwall and the Isles of Scilly experience, require a robust transport service as it plays a key role in ensuring improvement of the health of patients and provides reassurance to family members. Stakeholder consultations have provided valuable local insight and supported already identified challenges.

This will cover non-emergency NHS funded patient transport for patients travelling to receive healthcare at all NHS and independent service providers contracted to the NHS.

This policy does not apply to emergency transport such as 999 ambulances, Air ambulance, helicopter search and rescue and mental health transport.

3. Responsibilities

Planned care directors and commissioning managers are responsible for ensuring colleagues are aware of, and follow the principles laid out in this policy.

The senior commissioning manager (clinical support) is responsible for managing the implementation and evaluation of this policy. They also prepare submissions on a regular basis to the policy area working group, liaising with relevant people, and providing training as requested

4. NHS patient funded transport

Isles of Scilly residents, please see 6

CIOS ICB policy is to fund in line with national statutory guidance with no discretionary payments other than those detailed within this policy document – see link to guidance: [Eligibility criteria for patient transport services](#)

Eligibility

(Extracted from national guidance)

A patient's eligibility for NHS funded patient transport services will be assessed against the following nationally defined clinical eligibility criteria:

- have a medical need for transport
- have a cognitive or sensory impairment requiring the oversight of a member of patient transport staff or suitably trained driver
- have a significant mobility need which cannot be met through public or private transport, including the support of available family or friends or a taxi
- have a safeguarding concern raised by a relevant professional in relation to them travelling independently.
- are travelling for renal dialysis
- wider mobility or medical needs that have resulted in treatment or discharge being missed

Patients should be assessed every time they request NHS funded patient transport as their condition may have changed.

A patient's eligibility for non-emergency NHS funded patient transport and provision of escorts should be determined by either a healthcare professional or by the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust who are both:

- Clinically supervised and/or working within locally agreed protocols or guidelines, and
- Employed by the NHS or working under contract for the NHS.

Exclusions

NHS funded patient transport eligibility does not extend to include:

- Patients who are usually able, for the purpose of daily living, to travel in a private car (e.g. a relative, friends or neighbour's car) or on public transport (e.g. a bus, train, volunteer car service or taxi); or
- Patients travelling for private treatment funded by themselves; or
- Transport for social need (e.g. because a patient does not have their own car); or
- Transport to primary care services e.g. GP or dentist; or
- Patients requiring an urgent or 999 response; or
- Visitors to patients in hospital.

However, you may be entitled to NHS funded patient transport if you have a temporary medical need (for example, your leg is in plaster).

Escort criteria for NHS Funded Patient Transport

(Extracted from national guidance)

Only healthcare professionals will normally be carried as patient escorts on NHS funded patient transport vehicles. Family members and friends may be authorised to travel in exceptional circumstances if they are able to provide the necessary skills or services that the patient requires on the journey that cannot be supplied by the transport staff.

A patient can travel with an escort if 1 of the following applies:

- The patient's medical condition is such that he/she requires constant supervision for safety (the escort must be able to meet the medical need and it should be established whether a healthcare professional would not be the preferred option); or
- The patient has mental health problems that prevents them travelling alone; or
- The patient is under 16 years of age; or
- The patient has significant communication difficulties, including learning difficulties, impaired sight or is hard of hearing (where a patient has communication difficulties the escort should be able to provide a positive benefit in ensuring the patient can understand anything being said to them by the

ambulance crew; for example, through the use of sign language where the patient communicates by British Sign Language).

CIOS ICB local criteria

- Patients attending a 20-week pregnancy scan will be entitled to funded escort travel. If this entitlement is unused, it cannot be saved for a later appointment; or
- Patients attending a 2 week wait appointment, where the initial diagnosis will be discussed will be entitled to funded escort travel for emotional support. If this entitlement is unused, it cannot be saved for a later appointment.

Only **1** relative escort will be permitted for children under 16 years and for adults who require constant attention and/or need an advocate during their hospital visit.

Where a request is made for a patient to travel with a friend/relative as an escort the decision to approve the request will be made by the Centralised Booking Service having sought appropriate clinical guidance.

How to book NHS funded patient transport

To receive NHS funded patient transport, patients must telephone the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust on 01872 252211 who will check eligibility against the nationally defined criteria and book any appropriate transport.

5. Healthcare Travel Cost Scheme (HTCS)

CIOS ICB policy is to fund in line with national statutory guidance with no discretionary payments other than those detailed within this policy document – see link to guidance.

- [Healthcare travel costs scheme](#)
- [The NHS \(travel expenses and remission of charges\) regulations 2003](#)

Eligibility

(extracted from national guidance)

The Healthcare Travel Costs Scheme is aimed at patients that have a financial need for assistance with their travel costs to access health services which are not primary medical or primary dental care services, for which the patient has been referred by a doctor or dentist.

To qualify for help under the Healthcare Travel Costs Scheme, patients must meet 3 conditions:

- At the time of their appointment the patient, or their partner (including civil partners) must be in receipt of 1 of the qualifying allowances or benefits listed:
 - a. Universal Credit

- b. Income support; or
- c. Income based Jobseekers allowance; or
- d. Pension Credit Guarantee Credit; or
- e. Income-based ESA; or
- f. Named on an NHS tax exemption certificate; or
- g. On a low income and named on certificate HC2 or HC3; and
- The patient must have a referral from a health care professional for a specialist or to a hospital for further NHS funded treatment or tests; and
- The patient's appointment must be on a separate visit to when the referral was made.

Exclusions

(extracted from national guidance)

The Healthcare Travel Costs Scheme does not apply in the following circumstances:

- Patients who attend an establishment to receive primary medical or primary dental services;
- Transport of patients with a medical need for ambulance transport;
- Patients being transferred between treatment centres;
- Patients who discharge themselves from hospital at their own request;
- Self-referral patients (who have not been referred by a doctor or dentist);
- Visitors to patients in hospital;
- Patients travelling for private treatment funded by themselves; or
- Overnight stay costs; or
- Patients receiving non- primary care services on the same visit and in the same premises as those occupied by the doctor or dentist who during that visit has referred them for that care in the course of providing primary medical or primary dental services. In these cases the patient has not made an additional journey outside of the journey undertaken to attend their primary care appointment and therefore reimbursement through HTCS is not appropriate; or
- Patients entitled to assistance through HTCS are only eligible to claim the cost of their travel to an Accident and Emergency if the reason for their attendance is in relation to a pre-existing condition for which they are under the care of a consultant. Where patients attend A&E for any other reason they would not be eligible for assistance through HTCS for help with their travel costs.

Reimbursement of escort costs for Healthcare Travel Costs Scheme

(extracted from national guidance)

Where deemed medically necessary by the patient's referring consultant, GP or another health care professional involved in the patient's care, the travelling expenses of an escort (or escorts) may also be claimed as part of the patient's travel expenses. Additionally, in cases where a child under 16 attends an appointment the travel costs of a parent or guardian escorting the child to its appointment may be paid.

Such payments are made on the basis of the patient's eligibility for the scheme irrespective of the escort's eligibility. The actual travel costs should be assessed on the same basis as those of the patient.

Eligibility for provision of escorts should be determined by either a healthcare professional or by the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust who are:

- Clinically supervised and/or working within locally agreed protocols or guidelines,
- Employed by the NHS or working under contract for the NHS, and
- Must be agreed in advance of the journey.

Payments are made on the basis of the patient's eligibility for the scheme irrespective of the escort's eligibility. The actual travel costs should be assessed on the same basis as those of the patient and assessed in the same way as all other Healthcare Travel Costs Scheme claims.

Only **1** relative escort will be permitted for children under 16 years and for adults who require constant attention and/or need an advocate during their hospital visit.

CIOS ICB local criteria

Outside of the statutory requirements of the Healthcare Travel Costs Scheme, CIOS ICB has identified 2 areas where, subject to strict eligibility criteria, the provision of an escort may be approved in order to provide emotional support for a patient either:

- Attending a 20 week pregnancy scan; or
- Attending a 2 week wait appointment, where an initial diagnosis will be discussed.

If this entitlement is unused it cannot be saved for a later appointment.

Types of transport

(extracted from national guidance)

Patients should use the most cost-effective means of transport, which in most cases will be public transport. When assessing how reasonable the means of transport is the following will be taken into consideration:

- The distance that the patient must travel
- How long the journey has taken to complete
- Whether the patient must make this journey frequently
- The availability, suitability, and accessibility of public transport
- The medical condition of the patient
- The age of the patient

The use of a taxi is only to be considered if no other alternative is available, considering the patient's circumstances.

Travel expenses for treatment abroad

(extracted from national guidance)

Patients travelling abroad for NHS funded treatment may make Healthcare Travel Costs Scheme claim for travel costs incurred in travelling to a port (including an airport, ferry port or international train station) in Great Britain from which an international journey begins.

The costs of travel from the port to the place of treatment fall within NHS foreign travel expenses and cannot be claimed through the Healthcare Travel Costs Scheme.

NHS foreign travel expenses are travel expenses which a patient necessarily incurs in travelling abroad from a port in Great Britain in order to receive services arranged by the NHS. A patient will only be entitled to the payment of NHS foreign travel expenses where the health service body, which has made the arrangements for services to be provided overseas, agrees the mode and cost of travel and the necessity or otherwise for a companion before the costs are incurred.

To claim payment or repayment of NHS foreign travel expenses the patient must apply in writing to the health service body which arranged the services within 3 months of the expenses being incurred, unless otherwise agreed with the health services body.

How to claim travel expenses

Patients can claim travel expenses from a nominated cashier's office, these are usually located in the hospital or clinic that provided the patient's treatment. To claim a reimbursement, patients must present their travel receipts, appointment letter or card and proof of qualifying benefits.

Nominated cashier offices are responsible for assessing Healthcare Travel Costs Scheme claims and making payments direct to patients.

Where a hospital or clinic does not have a nominated cashier's office, patients can complete an HC5 (T) form and post it to the address on the form. Postal claims can be made up to 3 months after travel expenses are incurred.

Mileage rates will be set at the advisory fuel rates specified by Her Majesty's Revenue and Customs (HMRC) for company cars as a proxy for the cost of fuel at the time of travel. Information of the current HMRC rates can be found by following the link: [Advisory fuel rates](#)

6. Isles of Scilly NHS funded transport

CIOS ICB's policy is to fund in line with national statutory guidance with no discretionary payments other than those detailed within this policy document - see link to guidance.

- [The NHS \(travel expenses and remission of charges\) regulations 2003](#)
- [Healthcare travel costs scheme](#)

Special arrangements are in place for residents of the Isles of Scilly who only must pay £5 towards the cost of NHS funded patient transport to the mainland. Travel to the mainland can be either boat or air transport. Air transport will only be available to Land's End airport.

Residents of the off islands are entitled to the off island element when travelling to the mainland for NHS funded treatment. Patients will be issued with a reference number for the off island element of their travel when they call the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust on 01872 252211.

Patients travelling to the mainland and back in the same day will be entitled to the reimbursement of either a Scheduled boat fare or a Special boat fare dependant on the time of their travel. Claims for this should be sent:

For the attention of the Patient Transport Team
 NHS Cornwall and Isles of Scilly
 Part 2S, Chy Trewail
 Beacon Technology Park
 Dunmere Road
 Bodmin
 PL31 2FR

Eligibility

(extracted from national guidance)

For Isles of Scilly residents to qualify for NHS funded patient transport to the mainland patients must meet 3 conditions:

- At the time of their appointment the patient must be usually resident (not temporary resident) on the Isles of Scilly; and
- The patient must have a referral from a health care professional for a specialist or to a hospital for further NHS funded treatment or tests; and
- The patient's appointment must be on a separate visit to when the referral was made.

Exclusions

(extracted from national guidance)

Isles of Scilly NHS funded patient transport does not apply in the following circumstances:

- Patients who attend an establishment to receive primary medical or primary dental services;
- Patients who discharge themselves from hospital at their own request;

- Self-referral patients (who have not been referred by a doctor or dentist);
- Visitors to patients in hospital;
- Patients travelling for private treatment funded by themselves; or
- Overnight stay costs.

Funding of Isles of Scilly travel is subject to the same exclusions as outlined in section 5 of this document.

Escort criteria

If it has been deemed medically necessary for an escort to accompany a patient, the escort must travel with the patient. The escort should escort the patient for the outbound and inbound journeys. Escort transport must be booked at the same time as the patients transport.

Only **1** relative escort will be permitted for children under 16 years and for adults who require constant attention and/or need an advocate during their hospital visit.

Where the nationally or locally defined criteria for escorts are met, the NHS will pay for the cost of an escort to travel to the mainland, minus a £5 contribution from the patient. The need for an escort must be agreed in advance of the journey.

Eligibility for provision of escorts should be determined by either a healthcare professional or by the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust who are:

- Clinically supervised and/or working within locally agreed protocols or guidelines,
- Employed by the NHS or working under contract for the NHS, and
- Must be agreed in advance of the journey.

National Criteria

(extracted from national guidance)

A patient can travel with an escort if 1 of the following applies:

- The patient's medical condition is such that they require constant supervision for safety (the escort must be able to meet the medical need and it should be established whether a healthcare professional would not be the preferred option);
or
- The patient has mental health problems that prevents them travelling alone; or
- The patient is under 16 years of age; or
- The patient has significant communication difficulties, including learning difficulties, impaired sight or has hearing loss (where a patient has communication difficulties the escort should be able to provide a positive benefit in ensuring the patient can understand anything being said to them by the travel operator's staff; for example, through the use of sign language where the patient communicates by British Sign Language).

CIOS ICB local criteria

Outside of the statutory requirements of the Healthcare Travel Costs Scheme, CIOS ICB have identified 2 areas where the provision of an escort may be approved to provide emotional support for a patient either:

1. Attending a 20 week pregnancy scan; or,
2. Attending a 2 week wait appointment, where an initial diagnosis will be discussed.

If this entitlement is unused, it cannot be saved for a later appointment.

Return travel

Patients attending for NHS funded services not requiring an inpatient stay must book their return travel at the same time as their outbound travel.

Patients travelling with an escort are required to complete their return journey within 72 hours of their outbound journey. Please note that the 72 hour calculation does not include Sundays as flights and sailings do not operate.

Where a patient cannot book their return travel due to being an inpatient with an unknown discharge date, they, or their representative, should telephone the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust on 01872 252211 as soon as the discharge date is known.

How to book Isles of Scilly NHS Funded Patient Transport

To receive NHS funded patient transport to the mainland, patients must telephone the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust on 01872 252211 to arrange air or sea transport.

Adverse weather conditions

If a patient (and escort where applicable) is not able to undertake the inbound leg (Mainland to Isles of Scilly) of their NHS funded patient transport Journey, due to weather conditions, accommodation costs on the mainland are not paid. Local arrangements have been put in place with Volunteer Cornwall for assistance with transport and accommodation should any vulnerable patient get stranded on the mainland. Volunteer Cornwall can be contacted for this purpose via the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust on 01872 252211. The costs for these services will be borne by the patient.

Cancellation or amendment of travel bookings

- Cancellation by travel operator – weather or technical
- Cancellation or amendment by Provider of NHS services
- Cancellation of amendment by patient

Patients may request to amend or cancel travel bookings provided that all conditions detailed in sections 7a and 7c are maintained. Where a cancellation or amendment is required as a result of adverse weather or technical issues with the transport provider or changes to appointment dates or times by an NHS organisation, there will be no cost to the patient.

In all other situations where cancellations or amendments are made at the patient's request, the patient will be liable for all costs associated with the change or cancellation that are charged to the NHS by the transport provider.

Frequent Travellers

Outside of the statutory requirements, CIOS ICB has identified frequent travellers as an area where access to a NHS Funded car service will be provided for those individuals who do not meet the nationally defined medical or financial eligibility criteria, subject to the strict eligibility criteria detailed below:

Frequent travellers are defined as those patients who are required to attend hospital:

- At least 3 times a week for a sustained course of treatment lasting a minimum of 3 weeks; or,
- At least 3 times a month for a sustained course of treatment lasting a minimum of 3 months.
- At least 18 treatments for a sustained course of treatment lasting between 3 and 6 weeks
- For renal dialysis

Discretionary payments

CIOS ICB's policy is to fund in line with national statutory guidance with no discretionary payments other than those detailed within this policy document – see link to guidance:

- [Eligibility criteria for patient transport services](#)
- [The NHS \(travel expenses and remission of charges\) regulations 2003](#)
- [Healthcare travel costs scheme](#)

This policy does not allow for discretionary payments that fall outside of the criteria detailed above for transport or accommodation costs.

Community transport services within Cornwall

Where a patient is not eligible for NHS funded patient transport there are a number of community transport services within Cornwall that can be accessed. Please follow this link for details: [Cornwall Council Community Transport](#)

The costs for these services will be borne by the patient.

Public transport

Please follow this link for information and resources relating to bus services across Cornwall: [Cornwall Council Buses in Cornwall](#)

Please follow this link for information and resources relating to train services across Cornwall: [Cornwall Council Train Services](#)

Appeals process

If a patient is unhappy with a decision to refuse non-emergency patient transport or reimbursement of travel costs or with the manner in which the policy has been applied to their individual circumstances, they should appeal to the Centralised Booking Service at Royal Cornwall Hospitals NHS Trust where it will be reviewed by a senior manager.

If the patient is unhappy with the outcome of the appeal, they can complain formally using the NHS complaints procedures. The Centralised Booking Service has local arrangements and procedures for investigating complaints which conform to NHS complaints procedures - [Royal Cornwall Hospitals NHS Trust Get in Touch](#)

The Independent Complaints Advocacy Service (ICAS) provides support to people in England wishing to complain about the treatment or care they received under the NHS. ICAS delivers a free and professional support service to clients wishing to pursue a complaint about the NHS.

7. Implementation plans and monitoring effectiveness

This policy will be shared as part of contractual arrangements with the patient transport providers in the CIOS ICB system. In addition the policy is available via our website and intranet.

Policy is monitored and reviewed in line with national and local policy and requirements.

8. Update and review

This policy will be reviewed in 2 years or sooner should any national guidance, legislation or statutes change.

9. Policies referred to in this document

CIOS ICB's policy is to fund non-emergency NHS funded patient transport where there is a statutory obligation to do so and make no discretionary payments other than those detailed within this policy document. These obligations are described in:

1. Eligibility Criteria for Patient Transport Services (PTS): [Eligibility criteria for patient transport services](#)

2. Healthcare Travel Costs Scheme – Instructions and guidance for the NHS (2010): [Healthcare travel costs scheme](#)
3. The National Health Service (Travel Expenses and Remission of Charges) Regulations 2003: [The NHS \(travel expenses and remission of charges\) regulations 2003](#)

CIOS ICB will provide access to non-emergency NHS funded patient transport for patients registered with and CIOS ICB GP practice or who are usually resident in Cornwall and the Isles of Scilly who:

- Meet the nationally defined criteria on health grounds (described in item 1 above)
- Meet the nationally defined criteria on financial grounds (described in item 2 and 3 above)
- Meet the locally defined criteria for frequent travellers
- Are usually resident on the Isles of Scilly (described in item 2 and 3 above)

CIOS ICB will provide access to non-emergency NHS funded patient transport for escorts of those patients identified above who:

- Meet the nationally and locally defined criteria for escorts

Patients should be assessed every time they request NHS funded patient transport as their condition may have changed.

Appendix 1: Full impact assessment

Name of policy, service or decision to be assessed: NHS funded transport policy

Department or section: Planned care

Date of assessment: January 2022

Person(s) responsible for the assessment: Tracy Gaughran and Tracey Coles

Is this a new or existing policy? Existing

General background information

Reason for undertaking full impact assessment: Contract review

Describe the aims, objectives and purpose of the policy, service change or development:

Update in line with national guidelines and criteria

Anticipated timetable for decision: Less than 1 month

What areas will this impact? Cornwall and Isles of Scilly

Which of the strategic objectives apply to this full impact assessment? Improve care experience

What are the commissioning arrangements? Solo health

What are the contractual implications for the policy or service change?

Improved and clear delivery of service

Who implements the policy or service? NHS Cornwall and Isles of Scilly

Who benefits or is intended to benefit from this policy or service? General population eligible for funded patient transport

What health and social care outcomes are achieved or wanted from this policy or service? Other, please explain, improved discharge, ensuring equality for accessing appropriate pathways of care across Cornwall and the Isles of Scilly.

How will this be monitored? Formal through contract

What factors or forces could contribute or detract from the outcomes? Click or tap here to enter text.

Who are the main stakeholders in relation to the policy or service? All

Is there clinical evidence for effectiveness of the policy or service? Other, please explain, not a clinically lead service outcome.

Does this policy or service link to health and social care overall strategy for the next 5 years and current direction of travel for integrated communities?

Yes, partly

Engagement

How have you engaged stakeholders in gathering or testing the evidence available? Full market engagement in 2018 which has fed into this policy and also current market engagement of provider stakeholders under PCR 2015.

What is the experience of individuals who access the service? Partly negative

How have you engaged stakeholders in testing the policy or service proposals? Engagement event

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:
Members of the wider health community and service users.

Impacts

Access to services

Aspect	+ or – impact	Details and plans to minimise negative impact
Ability of people to access the service	+	Improved national guidance on eligibility criteria to patient funded transport
Eligibility of people to receive the service	+	As per national and local guidance
Longer term sustainability of the service	+	5 year contract
Reducing health inequalities	+	Having eligible users of the service with the right access at the right time
Waiting times to receive service	+	Non clinical service

Quality of services

Aspect	+ or – impact	Details and plans to minimise negative impact
Choice for members of the public		Non applicable to choice
Clinical performance or outcomes		Non applicable
Cohesion with wider services	+	Adds to the flow of the systems to work to policy
Operational effectiveness	+	Regular reviews to ensure effectiveness in the system for transport
Statutory NHS targets	+	Helping to contribute toward net zero emissions

Members of the public and carers

Aspect	+ or – impact	Details and plans to minimise negative impact
Carer experience	+	Regular reviewing specifications in line with national guidance and regulations
Psychological	+	
Privacy and dignity	+	
Public care journey and pathway	+	
Public care standards	+	
Public experience	+	
Public safety	+	

Wider community

Aspect	+ or – impact	Details and plans to minimise negative impact
Cohesion with community strategy	+	
Community safety, crime, and disorder	n/a	
Environment, including climate change	+	New procurement being evaluated in line with NHS aim for net zero
Information management	+	Contract reviewed in line with IG governance
Local economy	+	
Rural isolation	+	The service provision allows eligible people to have the right service where no public transport is available.
Safeguarding*	+	All providers will be monitored in line with ICB safeguarding polices
Social care		Not applicable
Technology	+	Using up to date technology to allow us to provide a more robust and efficient service
Transport	+	Essential to the delivery of contract and in line with contract principles of age and maintenance of vehicles.

* For safeguarding, consider the Care Act 2014 6 key principles: Empowerment, prevention, proportionality, protection, partnership, and accountability.

Wider system partners

Aspect	+ or – impact	Details and plans to minimise negative impact
Care homes	+	Allowing patients to get to /from appointments or home from discharge.

Aspect	+ or – impact	Details and plans to minimise negative impact
Cornwall Council	+	Assists with keeping people well and in their homes
Cornwall Partnership NHS Foundation Trust	+	
Council of the Isles of Scilly	+	
Domiciliary care providers	+	
E-zec Medical Transport	+	
Hospice providers	+	
Kernow Health CIC	+	
NHS 111 (Vocare and Kernow Health CIC)	+	
Out of hours primary care	+	
Primary care	+	
Royal Cornwall Hospitals NHS Trust	+	
South Western Ambulance Service NHS Foundation Trust	+	
University Hospitals Plymouth NHS Trust	+	
Other system partners Please specify and add lines as necessary	+	

Financial aspect

Aspect	+ or – impact	Details and plans to minimise negative impact
Implications for individual or carer	+	Ensuring those patients get to their appointment at the right time.
Implications for local authorities	+	Ensure a positive impact on the flow of patients which effect local authorities
Implications for NHS Cornwall and Isles of Scilly	-	Cost pressure as activity increases with more eligible criterion and aging population. New procurement being undertaken to ensure best practice and service allowing for economy of scale in contract length
Implications for other NHS commissioning organisations	-	As above.
Implications for GP practice	+	
Implications for primary care network (PCN)	+	
Implications for surrounding practices	+	

Aspect	+ or – impact	Details and plans to minimise negative impact
Implications for NHS provider organisations	+	
Implications for peninsula	+	
Implications for private sector	+	
Implications for voluntary sector	+	

Anticipated climate of opinion

Aspect	+ or – impact	Details and plans to minimise negative impact
Clinical opinion	+	
Colleagues	+	
Local community	+	
Media	+	
Political	+	

Protected characteristics

What is the differential impact on people from the perspective of race, nationality and/or ethnic origin? Does this have a positive or negative impact on people from an ethnic minority background? How will any negative impacts be mitigated?

Any risk to this have been met with the contract criteria and specifications in terms of the providers roles and responsible. (NHS Standard contract terms apply).

What is the differential impact on people from the perspective of sex? Does this have a positive or negative impact on people who identify as male, female, or intersex? How will any negative impacts be mitigated?

No discernible impact.

What is the positive or negative differential impact on people from the perspective of disability? How will any negative impacts be mitigated?

Positive. Transport that is suitable for those patients that require stretcher, hoist or other assistants within the remit of this contract are addressed with the NHS standard contract terms and service specific specs.

What is the differential impact on people from the perspective of sexual orientation? Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual, or asexual? How will any negative impacts be mitigated?

Positive. There are no registered risks. Providers adhere to NHS standard contract terms in relation to protective characteristics.

What is the positive or negative differential impact on people from the perspective of age? How will any negative impacts be mitigated?

Negative. However, this service is based on eligibility criteria (medical/financial) not age related for transport/funding for transport, which is under national guidelines.

What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impacts be mitigated?

Positive this service is based on eligibility criteria (medical/financial) not age related for transport/funding for transport, which is under national guidelines.

What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impacts be mitigated?

Non applicable

What is the differential impact on people from the perspective of gender re-assignment? Does this have a positive or negative impact on people who identify as trans or transgender, non-binary or gender fluid? How will any negative impacts be mitigated?

Non applicable

What is the differential impact on people from the perspective of pregnancy and maternity? Does this have a positive or negative impact on people who are pregnant, breast feeding mothers, or those on maternity leave? How will any negative impacts be mitigated?

Positive as it offers support under national guidance as varying stages of pregnancy.

Other identified groups. How will any negative impacts be mitigated?

Operated under the national guidelines.

Human rights

How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy? If they haven't, please review this document and amend to incorporate these values.

PTS enables eligible patients to the right appointment for the right treatment at the right time. Thus allowing for equitability in access to NHS services.

Which of the human rights articles does this document impact?

The right:

- to life
- not to be tortured or treated in an inhuman or degrading way
- to liberty and security
- to a fair trial
- to respect for home and family life, and correspondence
- to freedom of thought, conscience, and religion
- to freedom of expression
- to freedom of assembly and association
- to marry and found a family
- not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
- to peaceful enjoyment of possessions

What existing evidence (either presumed or otherwise) do you have for this?

Click or tap here to enter text.

How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?

Click or tap here to enter text.

Social Value Act 2012

NHS Cornwall and Isles of Scilly is committed and obliged to fulfil the requirements of the public sector Social Value Act 2012. This act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area. Please describe how this will support and contribute to the local system, wider system, and community.

Aspect	+ or – impact	Details and plans to minimise negative impact
Economic: promote skills, tackle worklessness, maintain employment, increase volunteer hours to support the community and promote inclusion	+	
Environmental: support local, reduce congestion	+	
Inclusion of small medium size enterprises (SMEs) in the process and supply chain	+	

Aspect	+ or – impact	Details and plans to minimise negative impact
Social: reduce anti-social behaviour, tackle exclusion by promoting inclusion including to vulnerable groups	+	

General public sector equality duties

Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.

Allows equity in access for those that may struggle to attend appointments otherwise.

Describe how the policy contributes towards advancing equality of opportunity.

Based on national guidelines it allows access to transport for those that are both medically /financially eligible either under ambulance (non-emergency) or via other means (taxi, TAP, HCTS)

Describe how the policy contributes towards promoting good relations between people with protected characteristics.

This policy falls under the guidance of ICB policy and under the terms of NHS standard contract terms under which those characteristics are protected.

Any other impact not identified above?

N/A

Summary

If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and/or the working environment for that group of people.

Patient by which this policy effects will have better and easier access to medical appointments, this in turn promotes flow in the system and allows us to keep the population well.

Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.

This version was revised under new national criteria and also transferred to new ICB templates.

If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following full impact assessment action plan.

N/A

Full impact assessment action plan

Responsible person: Tracy Gaughran

Timescale for completion: 31 October 2022

Issues to be addressed: N/A

Action required: Sign off for publishing

Action taken: Click or tap here to enter text.

Comments: Click or tap here to enter text.

This impact assessment should accompany the policy or service change documentation through the sign off process.

Completed by: Tracy Gaughran

Date: 13 October 2022

Agreed by: Director for commissioning and inclusion

Date: 14 February 2023